Please type a plus sign (+) inside this box	→)
Please type a plus sign (+) inside this box	⋽	4

Approved for use through 10/31/2002. OMB 0651-0031 U.S. Patent and Trademark Office: U.S. DEPARTMENT OF COMMERCE

Substitute for form 1449A/PTO					Complet if Kn wn			
					Application Number			
INFOR	RMATIO	N DI	SCI	LOSURE	Filing Date		<u> </u>	
STATEMENT BY APPLICANT					First Named Inventor	JHA	J JENSEN	
					Group Art Unit			
(us	se as many s	heets a	s nece	essary)	Examiner Name			_
Sheet	١	of			Attorney Docket Number			

				U.S. PATENT DOC	UMENTS	
Examiner Initials*	Cite No.1	U.S. Patent Docum Kind C Number (if kno	ode ² Name of	f Patentee or Applicant Cited Document	Date of Publication of Cited Document MM-DD-YYYY	Pages, Columns, Lines, Where Relevant Passages or Relevant Figures Appear
		5794207	Walker	retal	Aug 11 98	1-11 or all
		6029141	Bazo	s et al	6-27-97	1-20 or all
-						· · · · · · · · · · · · · · · · · · ·
				·		
` `						

	FOREIGN PATENT DOCUMENTS									
	F	oreign Patent Do	cument	Name of Patentee or	Date of Publication of	Pages, Columns, Lines, Where Relevant				
Initials	Examiner Cite Initials No.1	Office ³	Number ⁴	Kind Code ⁵ (if known)	Applicant of Cited Document	Cited Document MM-DD-YYYY	Passages or Relevant Figures Appear	T ⁶		
						,		Ш		

Examiner	Date
Signature	Considered
	The state of the s

Burden Hour Statement: This form is estimated to take 2.0 hours to complete. Time will vary depending upon the needs of the individual case. Any comments on the amount of time you are required to complete this form should be sent to the Chief Information Officer, U. S. Patent and Trademark Office, Washington, DC 20231. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Assistant Commissioner for Patents, Washington, DC 20231.



^{*}EXAMINER: Initial if reference considered, whether or not citation is in conformance with MPEP 609. Draw line through citation if not in conformance and not considered. Include copy of this form with next communication to applicant.

¹ Unique citation designation number. ² See attached Kinds of U.S. Patent Documents. ³ Enter Office that issued the document, by the two-letter code (WIPO Standard ST.3). ⁴ For Japanese patent documents, the indication of the year of the reign of the Emperor must precede the serial number of the patent document. ⁵ Kind of document by the appropriate symbols as indicated on the document under WIPO Standard ST. 16 if possible. ⁶ Applicant is to place a check mark here if English language Translation is attached.

PTO/SB/08B (08-00)
Approved for use through 10/31/2002. OMB 0651-0031
U. S. Patent and Trademark Office: U.S. DEPARTMENT OF COMMERCE
as collection of information unless it contains a valid OMB control number.

U. S. Patent and Trademark Office: U.S. DEPARTMENT OF COMMERC nder the Paperwork Reduction Act of 1995, no persons are required to respond to a collection of information unless it contains a valid OMB control number

	ute for form 1449B/PTC		, no persons are required to re-	C	mplete if		
		-		Application Number			
INFO	ORMATION	N D	ISCLOSURE	Filing Date			
STA	TEMENT	RY	APPLICANT	First Named Inventor	JOHN	JENSEN	
017	\	,	ALLEGARI	Group Art Unit			
	(use as many s	sheet	s as necessary)	Examiner Name			
Sheet	1	of	1	Attorney Docket Number			

		OTHER PRIOR ART NON PATENT LITERATURE DOCUMENTS	
Examiner Initials	Cite No.1	Include name of the author (in CAPITAL LETTERS), title of the article (when appropriate), title of the item (book, magazine, journal, serial, symposium, catalog, etc.), date, page(s), volume-issue number(s), publisher, city and/or country where published.	T ²
		·	
Examine Signatur		Date Considered	

Burden Hour Statement: This form is estimated to take 2.0 hours to complete. Time will vary depending upon the needs of the individual case. Any comments on the amount of time you are required to complete this form should be sent to the Chief Information Officer, U. S. Patent and Trademark Office, Washington, DC 20231. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Assistant Commissioner for Patents, Washington, DC 20231.

^{*}EXAMINER: Initial if reference considered, whether or not citation is in conformance with MPEP 609. Draw line through citation if not in conformance and not considered. Include copy of this form with next communication to applicant.

¹ Unique citation designation number. ² Applicant is to place a check mark here if English language Translation is attached.